

Serial No. 10/814,663  
Amdt. dated June 2, 2005  
Reply to Office Action of February 2, 2005

Attorney Docket No. LX00083

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JUN 02 2005

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Application No.: 10/814,663

Confirmation No.: 7673

Applicant(s): Guo, Jin

Examiner: Wong, Albert Kang

Filed: March 22, 2001

Docket No.: LX00083

TC/A.U.: 2635

Customer No.: 20280

Title: Keypad Layout For Alphabetic Symbol Input

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Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AMENDMENT**

Sir:

In response to the Office Action of February 2, 2005, please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 3 of this paper.

DOCKET NO. LX00083

**MOTOROLA**  
**FAX TRANSMITTAL SHEET****RECEIVED**  
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JUN 02 2005

Motorola, Inc.  
Intellectual Property Section  
Law Department  
600 North U.S. Highway 45  
AS437  
Libertyville, Illinois 60048

Telephone: (847) 523-2322

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**8**

Number of Pages (including this page)

Date: June 2, 2005

To: Examiner Albert Kang Wong – Art Group 2635

Location: United States Patent and Trademark Office

Fax No.: (703) 872-9306

From: Hisashi David Watanabe - 37,465

Subject: 09/814,663– Guo, Jin Confirmation No.: 7673

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**MESSAGE:**

Enclosed herewith, please find AMENDMENT and associated papers, if any, for filing in the below-identified application.

**PLEASE GIVE THESE PAPERS TO:**EXAMINER:  
GROUP ART UNIT:  
SERIAL NO.:  
FILED:  
INVENTOR:Wong, Albert Kang  
2635  
09/814,663  
MARCH 22, 2001  
GUO, JIN

<b>TRANSMITTAL FORM</b> <small>(to be used for all correspondence after initial filing)</small>	Application Number	09/814,663	
	Filing Date	March 22, 2001	
	First Named Inventor	Guo, Jin	
	Group Art Unit	2635	
	Examiner Name	Wong, Albert Kang	
Total Number of Pages in this Submission	Attorney Docket Number	LX00083	

  

ENCLOSURES		(check all that apply)
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-Related papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CDs _____	<input type="checkbox"/> After Allowance Communication to a Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter with appropriate copies <input type="checkbox"/> Other Enclosure(s) (please identify below)
Remarks X Facsimile Transmittal		

  

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual	Hisashi David Watanabe	Registration No.	37,465
Signature	<i>Hisashi David Watanabe</i>		
Date	June 2, 2005		

  

CERTIFICATE OF TRANSMISSION	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO to facsimile number (703) 872-9306 on the date listed below:	
Typed or printed name	Hisashi David Watanabe
Signature	<i>Hisashi David Watanabe</i>
Date	June 2, 2005

<b>FEE TRANSMITTAL</b>					<i>Complete If Known</i>																																																																																																																																																																																			
Patent fees are subject to annual revision					Application Number	09/814,663																																																																																																																																																																																		
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<input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: <span style="border: 1px solid black; padding: 2px;">502117</span> Deposit Account Name: <span style="border: 1px solid black; padding: 2px;">Motorola, Inc.</span> The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Charge fees(s) indicated below, except for the filing fee to the above-identified deposit account.					<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2"></th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - 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